# Trichomonas Vaginalis

Presentation:

1. 26 yr old with profuse, foamy vaginal discharge with foul odor
2. had been promiscuous
3. PE: diffuse macular erythematous lesion of cervix = Strawberry Cervix
4. “whiff test”: sample + strong base = fishy odor
5. Dx = trichomoniasis

Trichomonas Vaginalis

1. motile protozoan organism with visible flagella🡪 slightly larger than PMNs, can be seen moving hither and thither on wet mount via ameboid motility.
2. colonizes female lower genital tract and male urethra / prostate
3. do not have a cyst form, do not survive well outside host
4. spread by direct contact

Epidemiology:

1. widespread in US and world in general
2. humans are only known host
3. Risk factors: sexually active young adults, promiscuity

Pathogenesis:

1. in women: found in vagina, cervix, urethra, bladder, Skene / Bartholin glands
2. in men: anterior urethra, external genitalia, prostate, epididymis, semen
3. women can be asymptomatic or can have inflammatory reaction (vaginitis) with numerous PMNs present and vaginal pH greater than 4.5
4. can also have direct damage by organism to epithelium🡪 microulcerations
5. most men are asymptomatic

Treatment / Prevention:

1. DOC: Metronidazole and Tinidazole (not US approved)
2. Prevention: don’t be a whore, monogamy = good